

HEALTH AND WELL-BEING BOARD 24 MAY 2022

WORCESTERSHIRE EXECUTIVE COMMITTEE UPDATE

Board Sponsor

Sarah Dugan, Chief Executive Officer, Herefordshire & Worcestershire Health & Care Trust

Author

Ruth Lemiech, Director of Place Development – Worcestershire Partnership, employed by Herefordshire & Worcestershire CCG

Priorities

Mental health & well-being	Yes
Being Active	Yes
Reducing harm from Alcohol	Yes
Other (specify below)	

Safeguarding

Impact on Safeguarding Children If yes please give details	No
---	----

Impact on Safeguarding Adults	No
-------------------------------	----

Item for Decision, Consideration or Information

Information and assurance

Recommendation

1. The Health and Well-being Board (HWB) is asked to note progress to date relating to the establishment and activity of the Worcestershire Executive Committee (WEC) and that evolution of these arrangements is ongoing.

Background

2. As the NHS moves into a new phase of delivery and Integrated Care Systems are formally created, it is timely to review the progress of the Worcestershire place-based partnership, the WEC. This paper provides an update of the recent activities that have been led through the WEC, associated governance structures, and the evolving synergistic relationship between the activities of the WEC and those of the HWB.

3. The core duties of Integrated Care System (ICS) are to:

- improve outcomes in population health and healthcare;
- tackle inequalities in outcomes, experience and access;
- enhance productivity and value for money;
- support broader social and economic development

4. The key components of the Integrated Care Board are set out at Appendix A.

5. The NHS 'Thriving Places' guidance suggest that place-based partnerships should start from an understanding of people and communities, agreeing a shared purpose; be built by doing and acting together; build on an ethos of equal partnerships across sectors and develop a culture and behaviours that reflect shared values and sustain open, respectful and trusted working relationships.

WEC priorities and activity to date

6. WEC and its associated sub-groups are focussing efforts this year on joining up approaches and integration of services. All of these priority work programmes are increasingly focused on their role in reducing inequalities.

- Improving access to urgent care with the programme managed through our Home First sub-group with escalation to WEC
- Restoring elective care services inclusively managed through the Elective care work programme with escalation to WEC
- Improving access to diagnostics and cancer waits
- Developing Primary Care Network (PCN) and District Collaborative working and plans
- Supporting the implementation of the HWB Being Well strategy
- Developing an integrated approach to frailty including falls
- Delivering a reduction in obesity
- Improvement in infant mortality has recently been identified as a new area of focus.
- Recognising and supporting our workforce challenges by ensuring place priorities are reflected in the ICS People workstream
- Development of a Business intelligence cell to ensure decisions are informed by population health and associated data.

7. Recent NHS planning requirements direct the NHS to focus energy and resources on prevention and early intervention, reducing the number of people who will go on to develop specialist health and care needs. We are embracing the opportunity to further integrate our strategic approaches to prevention and working closely at delivery level across the county – see section below on primary care networks and District Collaboratives.

8. Other headline areas that the WEC have explored include the Carers Strategy, WCC Commitment to Carers, ICS Outcomes Framework, Herefordshire and Worcestershire's Mental Health Strategy and Children and Young People's Strategy. There are also some specific NHS deliverables in terms of prevention, specifically around digital weight management and supporting inpatients to stop smoking, that are being successfully rolled out across the county, in partnership with public health colleagues.

Joint working across the system

9. At the HWB in February 2022, board members received and approved a set of principles for the WEC and HWB, that would govern integrated place-based working across the council, NHS and wider local partners as part of a move to create an ICS across Herefordshire and Worcestershire. The principles incorporated a description of WEC which is the key committee overseeing the integrated delivery of place-based, and primarily NHS priorities.

10. Behind the scenes, there is joined up working across the WEC and the HWB to ensure that agendas are aligned; there is clarity between the respective responsibilities of each and that decision making is clear and not duplicated.

11. The WEC is supported by public health colleagues and, in addition to receiving JSNA reports at a county level, is increasingly overseeing neighbourhood/community health needs being raised through public health leadership. This is leading to increasingly sophisticated data, that alongside local knowledge and insights will equip the District and NHS partners to really understand what will improve the health and wellbeing of their local communities.

12. General Practices across Worcestershire have been required to organise themselves into groups of Primary Care Networks (PCNs), under the leadership of nominated GP Clinical Directors as part of a national contract commissioned by NHS England. This contract requires delivery of a number of additional clinical services for patients and recruitment of additional workforce including non-clinical roles such as Social Prescribers and Health and Wellbeing Coaches. As part of the national contract, PCNs are required to work with their local communities to strengthen collaboration and integrated working.

13. Through the leadership of their Clinical Directors, PCNs have been working with District Councils across the county to agree how collaboration between the NHS and District Councils, at a local level, can deliver benefits for neighbourhoods and local communities. Districts and PCNs are working with a range of other partners, including representatives from the voluntary and community sector, Police, Children's services, Hospital Trusts and building on existing infrastructure such as asset-based community development workers, to deliver tangible improvements for their population. Initial focus areas are reducing and tackling neighbourhood health inequalities, Covid vaccination support including outreach and increasing uptake of screening interventions for example, Bowel and Cervical Cancer.

14. As the PCN's and District Collaboratives mature and the refreshed Health and Wellbeing Strategy is implemented, it will be important to ensure ongoing alignment between partners across the county. WEC members are committed to working efficiently and effectively in this partnership, ensuring their contributions result in a positive impact on the health and wellbeing of the population of Worcestershire.

Principle of subsidiarity

15. The WEC recently considered the recommendations of the Ockenden review, the independent report into maternity services in Shropshire. We are taking the lessons and learning from the report as we seek to build stronger, resilient and more efficient working practices across organisations. The report's findings of failures of governance and leadership, patterns of repeated poor care, poor working relationships and lack of trust between colleague's provide salutary lessons as we seek to bring together our efforts and integrate our services.

16. There are a range of boards that work across the Herefordshire and Worcestershire footprint, notably the Mental Health Collaborative and the People Board, which focuses on our collective workforce challenges. WEC is working with these to ensure that the principle of subsidiarity is followed, meaning that decisions are taken as closely to the individual as possible.

Urgent and emergency care update

17. Home First, a sub-group of WEC, oversees performance of the urgent and emergency care system in Worcestershire. Urgent and emergency pressures across the system continue to be challenging, impacting on ambulance handover delays at Emergency Departments and timeliness of patients seen in Emergency Department. Partners across Worcestershire are actively working together to ensure that alternatives to Emergency Departments are in place and hospital flow is not constrained by ineffective discharge processes.

18. Recently, an incident room with daily senior oversight, has been instigated at Worcester Royal to support the coordination of activities and monitoring of the pressures. Please note that due to the fast-moving nature of this service area, a more up to date position will be provided at the meeting.

Legal, Financial and HR Implications

19. There are no legal, financial or HR implications resulting from this report.

Privacy Impact Assessment

20. There are no privacy issues to report.

Equality and Diversity Implications

21. There are no equality and diversity implications associated with this paper.

Contact Points

Specific Contact Points for this report

Ruth Lemiech, Director of Place Development – Worcestershire Partnership, employed by Herefordshire & Worcestershire CCG
Email: r.lemiech@nhs.net

Supporting Information

- Appendix A – Core Component of an ICS

Reminder of the core component of an ICS

